#### **2014 APPLICATION INSTRUCTIONS**

# INDIANA ATHLETIC TRAINERS BOARD ATHLETIC TRAINER LICENSURE PACKET

This packet should include the following:

- 1.) Seven (7) pages of instructions and information
- 2.) A three (3) page application Form
- 3.) A Verification of BOC Examination/Certification Status form
- 4.) Official Transcript
- 5.) A Verification of State Licensure Form
- 6.) A Verification of Supervision Form
- 7.) Verification of employment/experience
- 8.) Application Fee
- 9.) Criminal background check

If your application packet does not contain these items, please contact the Indiana Professional Licensing Agency at (317) 234-3022.

PLEASE NOTE THAT YOU CAN OBTAIN A COPY OF OUR STATUTES AND RULES ON OUR WEBSITE AT http://www.in.gov/pla/athletic.htm.

## **INSTRUCTIONS AND INFORMATION**

Before completing and submitting your application to the Indiana Professional Licensing Agency, please read all instructions and information included with this packet. If you have any questions, please contact the Indiana Professional Licensing Agency at (317) 234-3022 or email us at pla10@pla.in.gov. Additionally, you can access information on the licensure of athletic trainers on the State of Indiana's website at www.pla.in.gov.

## CRIMINAL BACKGROUND CHECK REQUIRED AS OF JULY 1, 2014

Pursuant to Section 1.IC 16-18-2-16-3 an individual applying for an athletic trainer license with a postmark of July 1, 2014 or after shall submit to a national criminal history background check at the cost of the individual. Please see the step-by-step directions on how to complete the fingerprinting process in order to process your criminal background check.

Criminal background checks must be obtained after you apply for your athletic trainer license with the Board and prior to the issuance of a license.

The directions are located on pages 10 and 11 and on our website at www.pla.in.gov.

#### THE FAIR INFORMATION PRACTICE ACT

In compliance with IC 4-1-6, this agency is notifying you that you must provide the requested information on your application or your application will not be processed. You have the right to challenge, correct, or explain information maintained by this agency. The information you provide

will become public record. Your examination scores and official transcripts are confidential except in circumstances where their release is required by law, in which case you will be notified.

Your Social Security Number is being requested by this state agency in accordance with IC 4-1-8-1. Disclosure is mandatory, and your application will not be processed without it.

## MANDATORY DISCLOSURE OF U.S. SOCIAL SECURITY NUMBER

Pursuant to Section 7 of the Privacy Act of 1974, you are hereby given notice that disclosure of your U.S. Social Security number on this application is mandatory for the purpose of complying with IC § 25-1-5-8 and IC § 4-1-8-1 which provide that the Indiana Department of Revenue may obtain Social Security numbers from the Indiana Professional Licensing Agency for tax enforcement purposes. In addition, disclosing such number is mandatory in order for the Indiana Board of Podiatric Medicine to comply with the requirements of the federal National Practitioner Data Bank and the Healthcare Integrity and Protection Data Bank 42 U.S.C. §1320(a)-7e(b), 5 U.S.C. §552a, 45 CFR Part 60.1, and 45 CFR Part 61.

Failure to disclose your U.S. Social Security number will result in the denial of your application. Application fees are non-refundable and non-transferable (*Outlined in IC 25-1-8-2(e)*).

## **AGENCY ADDRESS**

Indiana Professional Licensing Agency Attn: Indiana Athletic Trainers Board 402 West Washington Street, Room W072 Indianapolis, Indiana 46204

# APPLICATION FOR LICENSURE AS AN ATHLETIC TRAINER

YOUR APPLICATION AS AN ATHLETIC TRAINER CAN BE OBTAINED THROUGH EITHER OF THE FOLLOWING METHODS. (APPLICANTS ARE ADVISED TO REVIEW THE REQUIREMENTS FOR EACH METHOD IN ORDER TO DETERMINE THE METHOD OF LICENSURE FOR WHICH THE APPLICANT IS MOST QUALIFIED). APPLICATIONS WILL NOT BE REVIEWED UNTIL ALL REQUIRED DOCUMENTS AND FEES ARE RECEIVED BY THE BOARD.

- 1. EXAMINATION
- 2. ENDORSEMENT (Exemption from examination)

## **EXAMINATION CANDIDATES**

The requirements for athletic training licensure through examination are as follows:

#### **APPLICATION**

Mail completed application along with all required documentation listed below to the Indiana Professional Licensing Agency at the address indicated.

## COMPLETION OF THE APPLICATION PROCESS

An application shall be considered abandoned if the applicant does not complete the requirements for licensure within one (1) year from the date on which the application was filed. An application submitted subsequent to an abandoned application shall be treated as a new application.

## CRIMINAL BACKGROUND CHECK REQUIRED

All applicants applying for a dental license shall submit to a national criminal history background check at the cost of the individual. Please see the step-by-step directions on how to complete the fingerprinting process in order to process your criminal background check on pages 10 and 11.

A criminal background check completed prior to the submission of your application for licensure will not be considered valid. If an application is not received by IPLA before scheduling a criminal background check, the applicant will be required to submit to another check resulting in additional fees.

The directions on how to complete the fingerprinting process are located on pages 10 and 11 and on our website at www.pla.in.gov.

## **AFFIDAVIT**

If you answer "Yes" to any of the eight (8) questions on the application, you must explain fully in a signed affidavit with an explanation or statement of facts and or events, including all related details. Describe the event including location, date, and disposition. If you have had a malpractice judgment, provide the name of the plaintiff. Letters from attorneys or insurance companies will not be accepted in lieu of your statement; however they may accompany your affidavit.

#### APPLICATION FEES

Applicants must submit a fifty-five dollar (\$55) application/issuance fee made payable to the Indiana Professional Licensing Agency. This fee may be submitted by cash, check or money order. We cannot accept payment by credit card. ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

#### **PHOTOGRAPHS**

Applicants must submit an passport quality photographs, taken within eight (8) weeks of the submission of the application. The photograph should be approximately 2 x 3 inches, head and shoulders view of the applicant only, black and white or color, of professional quality. No "Polaroid" type photographs, laminated photographs, laminated identification cards or group photographs will be accepted.

## **VERIFICATION OF EDUCATION**

Applicants must have completed at least a Baccalaureate degree from an institution of higher education that meets the academic standards for athletic trainers established by CAAHEP/CAATE approved program. These standards include the completion of an academic program that includes at least the following accredited courses:

- 1) Human Anatomy
- 2) Human Physiology
- 3) Physiology of Exercise
- 4) Kinesiology
- 5) Personal Health

- 6) Basic Athletic Training
- 7) Advanced Athletic Training
- 8) Therapeutic Modalities
- 9) Rehabilitation
- 10) Clinical Experience

Applicants must complete the coursework section of the application. If an applicant for licensure proposes to satisfy more than one (1) of the course requirements with one (1) combined course, the course must be credited for at least three (3) semester hours or four and one-half (4.5) quarter hours on an official transcript. In addition, if the course is completed in one (1) semester or one (1) quarter, it must be credited for no less than five (5) semester hours or seven and one-half (7.5) quarter hours on an official transcript.

## **OFFICIAL TRANSCRIPT**

You must submit an official transcript from the college or university from which you obtained your degree, showing that all requirements for graduation have been met and when the degree was granted.

NOTE: Transcripts must be original, official transcripts that come directly for the university. Copies or incomplete (not yet showing your degree granted) transcripts are not acceptable.

## **EXAMINATION**

The Board has adopted the Board of Certification's (BOC) examination to obtain athletic training licensure. You will be required to pass the BOC examination before you will be licensed as an athletic trainer in the State of Indiana.

Applicants must complete the top portion of the **VERIFICATION OF BOC EXAMINATION OR CERTIFICATION STATUS** form and forward the form to BOC for completion and submission to the Board. BOC charges a fifteen dollar (\$15) fee for processing this information. DO NOT SEND CASH.

## **VERIFICATION OF LICENSURE/CERTIFICATION IN ANOTHER STATE**

Applicant must complete **VERIFICATION OF STATE LICENSURE/CERTIFICATION FORMS** from each state in which you are currently, or have ever been licensed, certified or registered to practice any regulated health profession or occupation. This form must be completed by the state licensing board in each state and returned directly to the Indiana Professional Licensing Agency. This form may be duplicated. **You do not need to complete this form, if you only hold licensure or certification in the state of Indiana.** 

## **EXAMINATION CANDIDATES CHECKLIST**

Three (3) page application form
Passport Quality photograph
\$55 application/issuance fee
Transcript (Submitted directly from institution of higher education)
Verification of BOC Examination/Certification Status form (Submitted directly
from BOC)
Verification of Licensure/Certification in another state (If applicable)
Copy of a marriage certificate or legal name change documentation (If your name
is not the same on all of your documents)
 Affidavit (If you have given a "yes" response on the application)
 Criminal Background Check

## **ENDORSEMENT CANDIDATES**

The requirements for athletic training licensure through endorsement (exemption from examination) are as follows:

## **APPLICATION**

Mail completed application along with all required documentation listed below to the Indiana Professional Licensing Agency.

## **COMPLETION OF THE APPLICATION PROCESS**

An application shall be considered abandoned if the applicant does not complete the requirements for licensure within one year from the date on which the application was filed. An application submitted subsequent to an abandoned application shall be treated as a new application.

## CRIMINAL BACKGROUND CHECK REQUIRED

All applicants applying for a dental license shall submit to a national criminal history background check at the cost of the individual. Please see the step-by-step directions on how to complete the fingerprinting process in order to process your criminal background check on pages 10 and 11.

A criminal background check completed prior to the submission of your application for licensure will not be considered valid. If an application is not received by IPLA before scheduling a criminal background check, the applicant will be required to submit to another check resulting in additional fees.

The directions on how to complete the fingerprinting process are located on pages 10 and 11 and on our website at www.pla.in.gov.

#### **AFFIDAVIT**

If you answer "Yes" to any of the eight (8) questions on the application, you must explain fully in a signed affidavit, meaning an explanation or statement of facts and or events, including all related details. Describe the event including location, date, and disposition. If you have had a malpractice judgment, provide the name of the plaintiff. Letters from attorneys or insurance companies will not be accepted in lieu of your statement; however they may accompany your affidavit.

#### APPLICATION FEES

Applicants must submit a fifty-five dollar (\$55) application/issuance fee made payable to the Indiana Professional Licensing Agency. This fee may be submitted by cash, check or money order. We cannot accept payment by credit card. ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE

## **PHOTOGRAPHS**

Applicants must submit a passport quality photograph, taken within eight (8) weeks of the submission of the application. The photograph should be approximately 2 x 3 inches, head and shoulders view of the applicant only, black and white or color, of professional quality. No "Polaroid" type photographs, laminated photographs, laminated identification cards or group photographs will be accepted.

## **VERIFICATION OF EDUCATION**

Applicants must have completed at least a Baccalaureate degree from an institution of higher education that meets the academic standards for athletic trainers established by CAAHEP/CAATE approved program. These standards include the completion of an academic program that includes at least the following accredited courses:

- 1) Human Anatomy
- 2) Human Physiology
- 3) Physiology of Exercise
- 4) Kinesiology
- 5) Personal Health

- 6) Basic Athletic Training
- 7) Advanced Athletic Training
- 8) Therapeutic Modalities
- 9) Rehabilitation
- 10) Clinical Experience

Applicants must complete the coursework section of the application. If an applicant for licensure proposes to satisfy more than one (1) of the course requirements with one (1) combined course, the course must be credited for at least three (3) semester hours or four and one-half (4.5) quarter hours on an official transcript. In addition, if the course is completed in one (1) semester or one (1) quarter, it must be credited for no less than five (5) semester hours or seven and one-half (7.5) quarter hours on an official transcript.

You must submit an official transcript from the college or university from which you obtained your degree, showing that all requirements for graduation have been met and when the degree was granted.

NOTE: Transcripts must be original, official transcripts that come directly for the university. Copies or incomplete (not yet showing your degree granted) transcripts are not acceptable.

## **EXAMINATION**

The Board has adopted the Board of Certifications (BOC) examination to obtain athletic training licensure. Applicants may be exempted from taking the BOC examination by meeting any of the following criteria:

- 1. the individual is licensed in another state and the other state's standards for licensure or certification are at least equal to the requirements for licensure in Indiana:
- 2. the individual is certified by BOC and meets all other requirements for licensure in Indiana;  ${\bf or}$
- 3. the individual is certified by an organization recognized by the National Commission on Competency Assurance (NCCA) and meets all other requirements for licensure in Indiana.

If an applicant is using licensure/certification in another state to qualify for exemption, the applicant must submit **VERIFICATION OF STATE LICENSURE/CERTIFICATION FORMS** from each state in which you are **currently** certified or registered to practice any regulated health profession or occupation. This form must be completed by the state licensing board in each state and returned directly to the Indiana Professional Licensing Agency.

If an applicant is using BOC certification to qualify for exemption, the applicant must complete the top portion of the **VERIFICATION OF BOC** 

**EXAMINATION/CERTIFICATION STATUS** form and forward the form to BOC for completion and submission to the Board. BOC charges a fifteen dollar (\$15) fee for processing this information. DO NOT SEND CASH.

If an applicant is using certification by an organization recognized by NCCA, it is the applicant's responsibility to submit proof of this certification.

## **VERIFICATION OF LICENSURE/CERTIFICATION IN ANOTHER STATE**

Applicant must complete **VERIFICATION OF STATE LICENSURE/CERTIFICATION FORMS** from each state in which you are currently, or have ever been licensed, certified or registered to practice any regulated health profession or occupation. This form must be completed by the state licensing board in each state and returned directly to the Indiana Professional Licensing Agency. This form may be duplicated. **You do not need to complete this form, if you only hold licensure or certification in the state of Indiana.** 

ENDORSEMENT CANDIDATES CHECKLIST
Three (3) page application form
Passport quality photograph
\$55 application/issuance fee
Transcript (Submitted directly from institution of higher education)
Verification of BOC Examination/Certification Status form (Submitted directly from BOC)
Verification of Licensure/Certification in another state (If applicable)
Verification of Experience/Employment Form
Copy of a marriage certificate or legal name change documentation (If your name is not
the same on all of your documents)
Affidavit (If you have given a "yes" response on the application)
Criminal Background Check

## **TEMPORARY PERMITS**

Pursuant to IC 25-5.1-3-8, the Indiana Athletic Trainers Board **may** issue a temporary permit to practice as an athletic trainer to an applicant who qualifies under any of the following three criteria:

**1.)** The applicant has a valid license or certificate to practice in another state and the person has applied for a license from the Board.

If an applicant is using licensure or certification in another state to qualify for a temporary permit, the applicant may use the submitted **VERIFICATION OF STATE LICENSURE** form.

**2.)** The applicant is practicing in a state that does not license or certify athletic trainers but is certified by the Board of Certification (BOC), and has applied for a license from the Board.

If an applicant is using certification with BOC to qualify for a temporary permit, the applicant may use the submitted **VERIFICATION OF BOC EXAMINATION/CERTIFICATION STATUS** form.

**3.)** The applicant has met all requirements for licensure except successful completion of the BOC examination.

If an applicant has met all requirements for licensure, except successfully completing the BOC examination, the applicant **must** practice under the supervision of a licensed athletic trainer during the ninety (90) days in which the temporary permit is valid. These applicants must submit the **VERIFICATION OF SUPERVISION** form with all other application materials.

**NOTE:** Applicants with temporary permits who have not taken the BOC examination are encouraged to take the examination within the ninety (90) day period that the temporary permit is valid.

APPLICANTS WHO WISH TO OBTAIN A TEMPORARY PERMIT NEED TO CHECK THE APPROPRIATE BOX ON PAGE #1 OF THE APPLICATION AND SUBMIT AN ADDITIONAL CHECK FOR TWENTY-FIVE DOLLARS (\$25) FOR THE PERMIT

PLEASE BE ADVISED, UNDER CERTAIN CIRCUMSTANCES, APPLICANTS WHO MEET THE REQUIREMENTS FOR A TEMPORARY PERMIT ALSO MEET THE REQUIREMENTS FOR FULL LICENSURE. IN THESE SITUATIONS, A TEMPORARY PERMIT IS NOT NECESSARY AND THE APPLICANT SHOULD NOT APPLY FOR ONE. PLEASE READ THE REQUIREMENTS FOR BOTH THE TEMPORARY PERMIT AND FOR FULL LICENSURE TO DETERMINE IF A TEMPORARY PERMIT IS NECESSARY. IF YOU HAVE ANY QUESTIONS, PLEASE CALL THE INDIANA PROFESSIONAL LICENSING AGENCY FOR CLARIFICATION.

## A temporary permit expires on the earliest of:

- 1.) the date the person holding the permit is issued a license under this article;
- 2.) the date the board disapproves the person's license application; or
- 3.) ninety (90) days after the date of issuance.



## Fingerprinting in Indiana

## **Professional Licensing Agency**

A criminal background check (CBC) completed prior to the submission of an application for licensure will not be considered valid. If an application is not received by IPLA **before** scheduling a CBC, the applicant will be required to submit to another check **resulting in additional fees**.

Follow the simple steps outlined below to complete the fingerprinting process:

- 1. Using your computer web browser, go to <a href="https://www.L1enrollment.com">www.L1enrollment.com</a> and choose Indiana.
- 2. If you do not have access to the internet, you may call us toll-free at (877) 472-6917 to schedule an appointment. If you call, you will be asked for demographic and personal information instead of completing these steps yourself.
- 3. Click Online Scheduling and choose the language you wish to use for scheduling (English or Spanish).
- 4. Enter your first and last name and click "go".
- 5. Choose your Agency Name Professional Licensing Agency and click "go".
- 6. Choose the correct Applicant Category for your license type and click "go".
- 7. Select the location where you want to be fingerprinted. You may choose a region of the state, by clicking on the map, or entering a zip code to view a list of locations in a specific area. Press "go".
- 8. Click on the words "Click to Schedule" across from the location you want, under the day you wish to be fingerprinted. If you want a date further in the future, click the "Next Week>>" link to display more dates. Once you select the location/date combination, select the time for your appointment and click "go".
- 9. Complete the demographic information page. Required fields are indicated by a red asterisk (\*). When complete, click "Send Information".
- 10. Confirm the information by following the on screen directions to make any changes necessary. Once you review and verify the data is correct, click "Send Information".
- 11. Complete your payment process and click "Send Payment Information".
- 12. Print your confirmation page. If you provided an email address, you will receive an email confirmation as well.
- 13. Bring **one** of the following with you to your fingerprinting appointment: valid driver license, valid state issued identification card, valid passport, student identification card with picture and date of birth (DOB), work identification card with picture and DOB, valid alien identification card with picture and DOB. If you do not have the above identification, you will need **both** a valid birth certificate and a social security card.

- 14. Arrive at the facility at your appointed date and time.
- 15. The enrollment officer at the site will check your ID, verify your information, verify or collect payment, capture your fingerprints, and submit your data. This normally takes less than five minutes.
- 16. You will receive a signed receipt at the end of your fingerprinting session, which can be provided to your agency for proof of fingerprinting, if needed.
- 17. All results will be processed and delivered to the Indiana Professional Licensing Agency. L-1 is never in possession of criminal record data results